PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

0790703

											1,0		
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL OLAMAS			(Column 1)		(Column 2)		1	TYPE		OF		ENTITY	
TOTAL CLAIMS			48					RATE	FEE	7	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.0	OA	BASIC FE	+	
T	OTAL CHARGE	ABLE CLAIMS	<i>U</i> € minus 20=		٠ ع	6		X\$ 9=		OR	X\$18=	460	
	DEPENDENT (ninus 3 =		1		X43=		OR	X86=	81	
<u> </u>		NDENT CLAIM F		1				+145≃		OR		 ```	
* If the difference in column 1 is less than zero, enter "0" in column 2 " >								TOTAL		OR	TOTAL	1381	
11-17-04 CLAIMS AS AMENDED - PART II OTHER TI													
<i></i>		(Column 1)	(Column 2) (Column 3)					SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	. 28	Minus	- 44	0	=		X\$ 9=		OR	X\$18=		
AM	Independent FIRST PRESE	* 3 ENTATION OF M	Minus ULTIPLE DE	PENDENT	CLAIM			X43=		OR	X86=	88, a	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL		OR	TOTAL	17 00	
		(Column 1)		(Columi	ri 2)	(Column 3)	.А	DDIT. FEE		10	ADDIT FEE	21.	
_		CLAIMS		HIGHE		(COMMITS)	Г		4001	1 1			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus			=		X\$ 9=		OR	X\$18=		
AME	Independent FIRST PRESE	* NTATION OF MU	Minus	OF NIDENT C	L ALLA	=		X43=	·	OR	X86=		
		The state of the	CITY CE DEF	ENDENT	CAIN			+145=		OR	+290=		
TOTAL OR TOTAL													
ADDIT, FEEL													
3	`	CLAIMS		HIGHES	3	(Column 3)			4001				
I		REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENDMEN	Total	•	Minus	**		.		X\$ 9=		OR	X\$18=		
	Independent		Minus	*** .		=	\vdash	X43=					
1	FIRST PRESE	H			OR	X86=							
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE OR ADDIT. FEE ADDIT. FEE													
'n	ne *Highest Numb	per Previously Paid	For (Total or	independent)	is the h	o, enter 3. ighest number f	ound	in the appr	opriate box	in colum	nn 1.	7	
												1	